

profession to those schools to send out broad-minded, accomplished, educated, and good women who will assume all the new and improved duties of the new generation of nurses.

MISS NUTTING.—There was one feature of Miss Palmer's paper that was particularly interesting, and that was the number of schools which had considered the question of domestic science and had introduced it into their training; is there anyone here who can add a little information to that feature of Miss Palmer's paper?

MISS VAN KIRK.—I would like to speak of the influence on the insane hospitals. The Regents have required that those nurses should have experience in maternity and children's work, so they have applied to the hospitals that give that training, and in every case women who have spent three or four years training in an asylum have been greatly impressed, even in the hospitals where the standard has not been as it should be.

MISS NUTTING.—If the New York law has been able to accomplish so much, why may it not take up the work of the third year and see if pupils should be sent out in the third year to private duty or any other duty? If there is no further discussion, I will call upon Mrs. Hunter Robb for her paper on "The Affiliation of Schools for Educational Purposes."

THE AFFILIATION OF TRAINING-SCHOOLS FOR NURSES FOR EDUCATIONAL PURPOSES

By MRS. HUNTER ROBB

Cleveland, Ohio

"On first thought it might seem more fitting that the subject of this paper should be presented before the Society of Superintendents of Training-Schools, inasmuch as the carrying out of such a scheme must have a direct bearing upon the work of the individual superintendents and upon the object of that society. On the other hand, a federation meeting should be an advantageous ground upon which to array affiliation forces, since a federation already accomplished not only affords a stimulus towards a further extension of the idea along lines which, although differing in kind and degree, are fundamentally similar, but also supplies experience which may be utilized in determining how this extension may be brought about.

"It is with a little hesitation that I approach a discussion of the affiliation of training-schools for nurses, knowing that the plan is fraught with many difficulties that can only be met through the united deliberations and with the common consent of such bodies as are most nearly concerned.

"The past fifteen years have found us as individuals and as associations busy over improvements in nursing conditions and the education of the nurse. On the whole, it may be said that the progress made has been steady and encouraging, but considering that we had practically a

fresh, uncultivated field in which to work, it would be little to our credit as interested, intelligent workers were we not able to point to marked improvements over our first tentative beginnings. Of course, in great undertakings fifteen years is a very small space of time, and on account of the youth of the movement our efforts have necessarily partaken largely of the experimental. Nevertheless, we may congratulate ourselves that this experimental stage has now lasted long enough to justify us in drawing a certain number of definite conclusions as to the value of the methods so far employed. Moreover, now that we are able to see just where we stand in respect to educational matters we can better realize how present conditions may be affected by the affiliation proposition.

"It is hardly necessary to mention in detail all the work we have accomplished through mutual and associated effort. Fortunately, I think that we can be reasonably certain that little or no time has been entirely lost; that so far as we have gone there is not much to regret or to wish undone, and that our efforts thus far have resulted in a great deal of general good. But recognizing the fact that all our experimental work has been a necessary preparation for development on more original and broader lines in the future, it may be well at the present time to devote a few moments to the consideration of such steps as have had a direct bearing upon the educational advancement of the members of the nursing profession.

"From the first those of us who have been intimately associated with the organization and development of nursing have recognized that very difficult and serious problems had to be met and solved if we would have nursing organization stand for something more than mere numbers,—quantity without quality,—and if we nurses were finally to qualify ourselves in deed as well as in word to enter into the full privileges accorded to members of a profession. Such privileges should presuppose certain requirements, which, broadly speaking, are three in number: first, there must be a definite educational standard; secondly, a proper professional spirit; thirdly, recognition by the public of this professional standard. To provide means for the satisfaction of these requirements has been the aim of our two great associations of nurses. From the first the Society of Superintendents has had as its primary object the educational advancement of nursing and the development of a fixed standard of education that should be common to all schools and to all nurses. On the other hand, the Associated Alumnae, while working for the general uplifting of the nurse and her work, has sought for proper protection by the law and recognition by the public. The demand to some extent for improved educational conditions for training-schools has been the outcome of the putting into practice of some of the nurses' own ideals

whereby the medical profession has been taught to expect more and better things of the nurse. Again, as we all know, the advancement in medicine and surgery calls for a greater degree of skill, knowledge, and integrity on the part of the nurse. And, lastly, we have come to recognize that no public recognition could very well be asked for unless we had some sort of an educational standard upon which to base our claims. The first general steps were comparatively simple. A minimum of two years as a standard time for the education of the student nurse was already in existence, although there were some exceptions to the rule. The division of this period into junior and senior work with schedules of classes, lectures, and demonstrations in certain subjects appropriate to each year was no great feat, although were we to-day to examine carefully into the arrangement of such schedules, into the subjects taught and the ground covered in each, and into the methods employed, we should find a great diversity, more modifications by far than was justifiable or necessary to meet the individual needs of each hospital. Next, the practice of sending the student nurse out to do nursing in private families during her time of training was by a strenuous effort on the part of both associations largely done away with, thus enabling the student to profit by systematic instruction in the hospital during the full term of two years.

"Nevertheless, we still find it cropping up insidiously under the protection of the additional third year and under the guise of an educational feature.

"But the first change of real note was the lengthening of the term of training from two to three years, until the latter period has in this country become the time generally adopted, although we cannot say it has become the universal standard, since some schools still offer courses ranging from two to two and a half years, while others have forged ahead and are requiring three and a half to four years. Nor can we say that this increase in the duration of the training has always been very advantageous from a purely educational standpoint; for it is obvious to all that while the added year of experience is of undoubted value to the student, the hospital of the two reaps the greater benefit, particularly when the nurse's hours on duty have not been shortened. Many hospitals have adopted with readiness the third year, but only here and there, in very few schools indeed, have the hours in the wards been reduced to even eight practical hours of work. To add on a whole year to the course of training and claim that it is for educational improvement is manifestly a delusion unless a fair proportion of the extra time is devoted to study alone. And we all know that the capacity for mental effort in the average person counts for little after nine or ten hours of ordinary physical work, which is entirely free from the additional nervous strain

attendant upon nursing. In respect to hours on duty, therefore, we are still far from a generally accepted educational standard.

“Again, it has been conceded that the old-time method of giving a monthly allowance to each pupil was to be deplored on the principle that it lessened the educational value of the instruction and that it was far better to give an education commensurate with the services rendered. As a result, the monthly allowance is gradually being done away with—somewhat slowly, in fact, for the system of offering a small monthly compensation or a fixed sum at the end of the term of training is still practised in some schools which, it may be, do not feel sufficient confidence in the educational advantages they offer to lessen their chances for drawing the required number of desirable candidates by cutting off so powerful an inducement as this undoubtedly is to many good women. On the other hand, some few schools have gone even beyond the non-payment system and are requiring fixed entrance fees, ranging from twenty-five dollars to fifty dollars and one hundred dollars. In this respect, then, we are again far from a common standard.

“The subject of dietetics has received more and more attention until a practical and theoretical course of instruction in this branch of nursing is now regarded as necessary and is given in about every school. But too often we find the course is not arranged primarily from an educational standpoint, but rather is looked upon as a valuable asset in the economics of the hospital. And where shall we find any two schools that agree as to how the subject should be taught and how much time shall be devoted to it? All are so varied that no possible standard could be arrived at.

“A fresh impetus has been given to this particular branch of nursing and to that of household economics in relation to nursing by the reorganization and extension of that part of the teaching into a preliminary course of training, but in the plan of reorganization and systematization of the teaching we again find a great lack of uniformity. Preliminary courses at present range from three to four and six months, and the methods employed in the selection of subjects and in the manner of teaching them vary widely. Moreover, if the establishment of a preliminary course means that the hospital has an additional class to house and keep for from four to six months before the members enter the wards the added expense will certainly preclude the general adoption of a most valuable arrangement.

“Nor have we even an approximate standard of qualifications for the acceptance or rejection of applicants or for the dismissal of delinquent students; for a woman who may be regarded by one superintendent as an unfit probationer and is therefore refused, or a pupil who has been dismissed for reasonable cause, may promptly be accepted by another

superintendent and will ultimately be allowed to graduate. Finally the Teachers' Course in Hospital Economics has been sufficiently long in existence to prove to us that, while excellent in its way so far as it goes, it can never be the ultimate means of regulating the standard of education for nursing.

"These represent some of the principal measures that have had more or less of a trial and are familiar to most of us, as they have all been subjects for papers and discussions before the Superintendents' Society for some twelve years. And I would ask you to note the fact that whereas in almost every instance some attempt at accepting the whole or some part of some suggested improvement in methods has been made by individual schools, curiously enough in no single case has the society ever taken concentrated action, or pledged itself to the general adoption of any one form of improvement or to accept any standard so far proposed, feeling, no doubt, that such a measure would be impracticable. This means that, so far as the society is concerned, although through its efforts the general improvement has been amazing, we are as far from a generally accepted standard of education as we were in the beginning, so that we must perforce conclude under *present conditions* we can expect little, if any, more in this direction than we have already accomplished.

"The actual establishment of anything approaching a standard has been brought about by the nurses as a body through their Associated Alumnae. With the desire for legal protection and for some sort of legal recognition by the public there came at once the recognition of the imperative necessity for establishing something approaching to a common standard of education for all nurses who might seek to qualify for State registration. It became, therefore, one of the first duties of the Boards of Examiners in those States in which State registration has been legalized to prepare a standard of education for each particular State. Here at once great difficulties were encountered, and through the disability of graduates of certain schools in these States to qualify we are now brought face to face with the problem which must be solved in order to save disruption and confusion. How, then, shall we proceed to bring such schools into line for the purpose of State registration? The natural solution would seem to be through the affiliation of the various schools for educational purposes.

"But there are reasons other than these concerned with State registration which render it important that some such plan should be adopted. In the first place, in this country, at least, State registration cannot set a national standard, inasmuch as the laws governing each State differ in many respects. Furthermore, although the standard set in certain States may be all that can be reasonably desired under present condi-

tions, there is always the danger that amendments injurious to such a standard may be introduced and that in others it may be set unreasonably low to begin with. Moreover, how can any State require all its training-schools for nurses to come up to a given standard when not all of the hospitals in which schools exist are or ever can be general hospitals? Under present conditions, then, there will always remain some which will never be able to comply with the State requirements unless means are afforded them with this end in view. Such means must be first provided before any good standard can reasonably be required, and I am sure that the hospitals which are deficient would gladly avail themselves of increased facilities. When we read of what has been done in 'the best schools' the idea must surely strike us that where the sick are concerned there should be no best schools. Nevertheless, although it stands to reason that various grades of hospitals exist and must continue to exist and that all cannot afford equal opportunities for the education of nurses, it does not necessarily follow that the sick should be less efficiently cared for in one kind of hospital than in the other, provided that the women who wish to become nurses are supplied with equal advantages for rendering themselves competent. Our aim and desire, then, should be to establish a good uniform education for all nurses in every State and in all hospitals. Some system must be elaborated whereby we may obtain this uniform education, and until this is accomplished our sympathies must lie with the hospitals of limited opportunities.

"As a matter of fact, to my knowledge no hospital now exists at present where such a uniform education can be acquired. In matters of general training the large general hospital offers the larger field for experience than could be found in a similar institution of smaller capacity. Of course, the special hospitals do not offer scope enough, but when it comes to a definition of a full general training then it is equally true that the large general hospital must look to other sources for supplying a training in certain branches to round off its course. If, then, we set up as a standard a full general training, we must admit that neither the large nor the small hospital is complete enough to be quite independent, and that for lack of system, proper organization, and affiliation students in every hospital are every day losing valuable practical experience in different branches of nursing. We have given the independent method of carrying on training-schools a fair trial, and our results have proved deficient. Each school has gone its own way, apparently indifferent to or careless of the well-being of the whole. Fortunately, however, this 'I am superior and better than my neighbor' attitude has been in a great measure only in the seeming. We know that a very different spirit exists, and that, although not always openly

expressed, the hearty desire for the general betterment has a real existence. Hospital authorities and superintendents of training-schools have done to the best of their ability, and have utilized approximately to the limit the possibilities of the system under which they have been hampered and under which they have had to work. The main limitation is based upon the fundamental fact that from the educational standpoint the relation of the training-school to the hospital has always been an impossible one. With our present system the hospital work has always come first, and the nurses' education has been relegated to a secondary position. The system is responsible for the fact that undesirable candidates are frequently accepted, because the work of the hospital must go on whether the proper standard of nursing is maintained or not, even at the risk of forfeiting the best results for the hospital as well as the highest excellence for the nurse. In this, as in most other instances, superintendents of schools have been powerless to do more than they have already done.

"In no instance has a training-school for nurses been founded primarily as an educational institution; it has always been regarded as an appendage to a hospital. But until this is changed and schools for nurses are founded for the primary purpose of educating women in nursing—the hospital being utilized as the ground for gaining practical experience—we can scarcely hope for any uniformity among nurses or for the highest grade of work for the hospital or the sick. The best medical schools now stand on this basis and the results are more and more gratifying. How can schools for nurses be established on a similar basis? Even at the present day I believe this end may be largely accomplished by a proper affiliation of the schools which now exist.

"The subject of affiliation is not a new one with us, for the existence of difficult problems connected with the bringing of the small general and specialty hospital into line for educational purposes was recognized years ago. My paper on 'Nursing in Small General and Specialty Hospitals,' read before the Society of Superintendents in 1897, would seem not to be out of date even at the present, and to a certain extent might still be employed to supplement the present one. In it I explained in detail the need for a general nursing standard and for coöperation of larger with smaller hospitals. Coöperative nursing was tried as early as 1888, when the Illinois Training-School of Chicago undertook for a given sum the entire nursing of the Presbyterian Hospital of that city. This arrangement was made with the object of supplying a training for the students of the Illinois Training-School in the care of private ward patients, and of doing away with the necessity of sending pupil nurses out to private duty. At the same time it did

away with the small training-school attached to the Presbyterian Hospital for the reason that the opportunities were limited to certain kinds of nursing and the training was inadequate. This was my first experience in coöperative nursing, but ever since I have been a firm believer in some such plan as the ultimate basis of training for all schools. Since that time more or less coöperative nursing has been attempted. At one time in Milwaukee a central school had under its charge as many as nine hospitals, and within the past three or four years quite a long list of schools could be named that have coöperated, usually with the view of supplementing some branch of training that was lacking. How permanent these later efforts at coöperation may be remains to be seen. Such experiments, however, were always heretofore short lived, and without going accurately into statistics I may say that the majority of these earlier attempts sooner or later ended in disruption. The arrangement made by the Illinois Training-School lasted perhaps longer than any other, some fifteen years elapsing before its final withdrawal from its nursing relations with the Presbyterian Hospital. An account of the many causes for the failure of this plan of nursing would be too lengthy to give here and would not be particularly to the point, but one chief impediment to its success and general adoption lies in the difficulty of adapting the methods of one school to those of another without too much repetition and loss of time and some friction. Were there one generally recognized standard, the same curriculum, and only certain definite teaching required of each school so affiliated, these objections would not hold to the same extent. That coöperative nursing thus far has not proved an unqualified success is not surprising. That any degree of success has been attained is extraordinary for the reason that the plan was not started on the right basis. The added experience of years has taught that the chief obstacle lies in the fact that the necessary stability is lacking in that those most nearly concerned have never been afforded proper representation in the administration of the coöperative plan. The balance of power usually centred in the school that contracted to do all the nursing or to provide a certain branch of training for another hospital. The hospital thus cared for after the financial consideration had been agreed upon had practically no voice in the choice of the methods to be employed in the nursing. With our love for the personal note, it is only natural that each superintendent of nurses and each hospital should wish to have a voice in the arrangements for the education of one's own students and in the administration of so important a department of the hospital as that of nursing.

"Such considerations and others of equal importance must therefore be borne in mind. In endeavoring, then, to arrange for the affilia-

tion of training-schools I would advocate the establishment of central institutes in each State offering a comprehensive theoretical and practical training in general nursing. Such institutes would be independent of any particular hospital, but would be organized and administered through a central committee composed of the proper representatives from the hospitals and schools entering into the affiliation. The proper representatives would be chosen from among those most nearly concerned in the welfare of each hospital—namely, the trustees of the hospital, the medical staff, the superintendent of the hospital, and the principal of the training-school. A proper selection of this board is the first essential, for with the best intentions in the world no outside element could fully understand or successfully deal with the particular needs and conditions belonging to the education of nurses. From these several sources a properly balanced committee on training-school affairs should be selected, such committees combined forming the central committee of the central nursing institute. The institute, be it distinctly understood, would have to do not only with preliminary courses in connection with the preparation of candidates, but would be responsible for the entire education in general nursing of accepted candidates. Upon this central committee would devolve the fixing of a standard of general training, the preparation of a general curriculum, the selection of lecturers, instructors, and inspectors, the determination of a plan of rotation from one hospital to another, the definite ground to be covered in each hospital, and the management of the finances of the institute. This central committee would be divided into the necessary sub-committees, among which might be mentioned the Committee on Finance and the committee dealing with the admission of probationers, inasmuch as all applicants to any school in affiliation would be referred to the central institute for acceptance or rejection. Such a committee would naturally be composed of the principals of the affiliated training-schools. In order to take in all the hospitals in a large or populous State, the establishment of two or more such institutes might be necessary, but all would be organized on the same basis and all examinations would be held at the same time all over the State. All diplomas would issue from the nursing institute and not from any one hospital.

“Broadly speaking, in arriving at a standard of training it would be necessary to decide upon the requirements for entrance and the length of the preliminary course and of the course of training, and the subjects required to be taught and practised, and the arrangement of the curriculum for the several years. Each central institute would provide a set of regular lectures and a course of instruction. The head of the institute might also under the direction of the central committee act as

inspector of the several affiliated training-schools. The various hospitals would be arranged into groups in such a way that each group would provide a full course of training. The method of distributing the students to each of such groups would also have to be arranged. The Finance Committee would deal with endowments, scholarships, fees, lectures, and instructors' salaries, the pooling of the expenses, and the like. These and many other matters present problems which are of vital importance, and which must be satisfactorily dealt with before affiliation can attain even a measure of success. In the present paper they cannot be dealt with in detail.

"The advantages of a successful affiliation would be manifold. First and foremost, the establishment of the much to be desired standard could be brought about, and in all forms of hospitals the nursing would be uniform, this uniformity rendering State registration comparatively easy to attain. Moreover, the sick in our hospitals and homes could feel assured of better nursing. The preliminary course would be assured to all students without additional cost to the individual hospital. The arrangement would also tend largely towards economy, since much repetition would be saved and the number of instructors and lecturers would be minimized. Being primarily educational, the course of training would attract a more uniformly desirable class of women. Again, the superintendents of the training-schools would be relieved of much clerical work and saved many interruptions. They would individually be relieved of the selection and care of probationers, and would thus be enabled to systematize their time better and to spend more of it in the wards, where their powers of observation, teaching, and influence are of so much practical value.

"The whole aim of the central institute should be towards thoroughness and the production of quality rather than quantity. It should, therefore, in addition to the undergraduate education, provide post-graduate courses in general nursing and a special course in every special form of nursing that is allied with medicine. All such courses must be thorough. Three years should be a sufficient time in which to cover the course in general training, and if a woman is to spend more than three years in learning to be a nurse the extra time, over and above the three prescribed years, should be devoted to optional work and special training in some particular branch of nursing for which a student has shown a particular aptitude. At the present day in the world's work there is a general tendency towards coöperation—towards the formation of trusts if you will—and towards specialization of a high order in all branches. For it stands to reason that after a thorough general groundwork has been laid, the individual who selects a particular branch from natural

taste, inclination, and adaptability is bound to carry that branch to a higher degree of excellence and gain better results than is possible when the energy is diffused over a wide field. As in medicine, so in nursing, the specialist is bound to come more and more into evidence, and nursing work must naturally be subdivided. Already we find distinct specialists in our midst—the district nurse, the army nurse, the superintendent of the general hospital and training-school, the superintendent of the special hospital—for children, for contagious diseases, for obstetrics, for tuberculosis, for nervous diseases and insanity. Add to these the instructor in dietetics, the sanitary inspector, the school nurse, the masseuse, and we have already a goodly list that need special methods for their proper preparation, other than those that have formed a necessary part of the training in general nursing. But so far as the central institute is concerned, only those subjects that pertain primarily to the nursing of disease should find their place in the general curriculum. The specialties must fall into subdivisions and groups, standing for certain objects. Thus district nursing includes more than the nursing of the sick poor; it deals with a branch of social economics in which the nursing itself takes a secondary place, the nurse serving as an instructor in the art of right living and the maintenance of health. Such a specialty, although it requires as a general basis the course in general nursing, calls for a knowledge of certain social conditions that could not possibly be treated properly during the ordinary course of training. Again, as regards the making of superintendents and instructors, only here and there do we meet with a woman who shows the natural executive ability to manage large affairs in a business-like way, or who possesses the faculty of imparting knowledge to others in a clear manner; and only those who can profit by them should have the larger and special opportunities for developing this natural gift.

“Nor is it necessary that provision for every form of teaching should be supplied by the centralized school when by means of affiliation with institutions dealing with other forms of work we can obtain what is particularly needed to supplement our own teaching. For example, for teachers’ work a nurse might take a prescribed course in Teachers College, New York, for social work a course in the School of Philanthropy, Boston, or similar institutions.

“Our great trouble has been that seeing all these many fields of usefulness ready for nurses and needing workers, for want of a proper system and classification we have frantically tried to add on a little instruction in each to the list belonging to the general nursing curriculum, with the result that no one of them is dealt with thoroughly, and that the special student is unsatisfied, and the general student has one

additional burden to carry. If we are willing to reorganize our training-schools on the basis of a general theoretical and practical education that will embrace all hospitals and all subjects pertaining to the care of the sick and rigidly relegate all other subjects to their proper place as specialties to be taken up only by the women who have the natural ability and taste for them, we shall in the course of time reap some very satisfactory results in both the general nursing and the specialties. And to-day no better methods suggest themselves to my mind than those which could be provided through the affiliation of all hospitals for nursing purposes on some such basis as I have endeavored to present to you."

MISS NUTTING.—We have listened to a grouping together of thoughts and ideas and plans, some of which are entirely new to many of you here present, some of them have come to the mind of one person, some to another, but all are here first presented in a concrete and concise form. To listen to this and to think of the possible outcome sounds as if we were preparing to usher in the Millennium. Meanwhile, we have come back to the present condition and deal with that, and it may be a help if those here present who have in the course of their work benefited by any such affiliations as has been suggested will give us the benefit of their experience. The accumulation of the small benefits is what will ultimately make possible the greater ones. This paper is open for discussion or for question.

MISS McMILLAN.—For some time I have felt that until our schools are outside of general hospitals we cannot solve these problems which we have. I very heartily endorse Mrs. Robb's ideas. Would it not be possible for us to take some definite action this year and begin towards that end?

MISS NUTTING.—Those who have had experience in the two kinds of training-schools,—the training-schools which are under hospital government and those which are under outside government,—might add to this.

MISS McKECHNIE.—I might tell of my experience with a school that was independent and affiliated with a general hospital; the hospital was a city hospital, and at the end of each year the contract should be renewed with this hospital. The contract called for a certain number of pupils to do the work in the hospital wards, and the allowance was paid back to the endowment fund of the school. This had gone on for a number of years, but eventually was deferred and deferred because no satisfactory contract could be made that would be an undoubted advantage to the schools. There were not enough nurses to do the work and there was not enough money coming into the school, and money was the stumbling-block, and the school failed to complete its contract at the end of another year, and it was obliged to withdraw from the hospital, and the school was abandoned. The conclusions I think one might come to, perhaps more especially with a hospital that was under political control, is the necessity of having public officials understand the education from the standpoint of a nurse, and what the school was struggling for it seemed impossible to obtain.

MISS NUTTING.—Then it was not the system that was at fault, but the education of the public.

MISS McKECHNIE.—The system was all right, as Mrs. Robb has said, but

these questions had not solved themselves and were not so apparent to the management as they are now.

MISS MCISAAC.—As one having a long experience in affiliation of that kind, I would like to hear out what Miss McKechnie has said, and that is that money is the great obstacle. The Illinois Training-School did for fifteen years care for two large hospitals, and the greatest difficulty we experienced was the subject of money; the school has control of a large city or county hospital, as it is called in Chicago, and there is the yearly fracas about the contract. In this instance it has always been renewed, and while there have been annual difficulties, still, they have been overcome, and in a way satisfactorily. A school that is independent of the hospital government has a great many advantages which a school under hospital control has not. One as a superintendent or manager of the school has much more power in the education of the nurses and can do a great many things in which one would be restricted under the government of the hospital, but only until the system is elaborated in a way which Mrs. Robb has outlined and an institution of that kind recognized, can affiliation ever be carried out to the full and in a satisfactory way. I believe in it thoroughly; I have seen its practical work and still believe in it, and when it is arrived at in the way suggested I believe it will be our salvation.

DR. BANNISTER.—I have been a superintendent and I can add a word or two to what has been already said, that the question is largely a financial one, and also as to the renewing of the contracts at the end of the year. We had eight or nine hospitals, and the training-school was independent of any of them, so, of course, to do the nursing for these hospitals we had to have a great many nurses, and if we got an additional hospital it would require additional nurses. We had difficulties all the time, and we had always that anxiety at the end of the year as to whether all the contracts would be renewed or whether we were going to have half of our nurses on our hands, and we found that the public and even the hospital officials themselves were not in any way interested in the education of the nurse. The thing that they really thought the most of and the reason they allowed us to do their work was because it was cheaper for them than it would have been to do it themselves, and in a year's time they found that by some little inducement they might save probably a very small amount. They would then not make a contract for the next year, so in that way, while we gave our nurses a better training and the school a better training and did the work very well and increased the number of our nurses, when I left it the failure to renew a great many of those contracts caused both the system and the institution to die out.

MISS NUTTING.—Through all this one idea continually presents itself, and that is that the expense looms up very high. It seems impossible to accept the idea of expense in connection with the training of nurses from an educational standpoint. In the two preceding meetings an appreciation of that point has been dwelt upon as a very great necessity. I would like to add that I think the good influences of that affiliation in Milwaukee still remain, for I am quite sure I heard recently of an affiliation of schools for educational purposes still existing in Milwaukee.

MISS NEVINS.—I think one fact which all three speakers raised, apart from the educational standpoint, is the fact of the education still having to go on at the hands of nurses.

MISS PALMER.—I want to ask Mrs. Robb how she proposes to pay for the extra cost of nursing; is the pupil nurse to pay for it?

MRS. ROBB.—That is one of the details that I think should be settled by the central committee. Of course, this paper is simply the first thoughts; there are many still to be added; it was impossible in twenty minutes or half-hour's paper to more than suggest, but it is a subject, I think, which really calls for several more papers before we will have a comprehensive understanding of it. The subject of finances is one which naturally belongs to the central committee, but I will say that in suggesting and making up the committee I purposely put on the central committee representation from the trustees of the hospital because they are the ones, I think, who should assume the financial responsibility.

MISS MAXWELL.—Dr. S. Weir Mitchell says that if we are to make nursing a profession we will have to put it on educational lines, and in order to put it on educational lines we must charge for admission to our training-schools and make all pay for what they get.

MRS. ROBB.—Of course, the object in presenting this paper to-day is not only because the subject very closely affects the superintendents' work, but because I feel that if you think there is anything worth considering in it, it is necessary that some steps should be taken, such as a committee appointed.

MISS NUTTING.—Could there be any better time in which to appoint a committee than when the two societies are gathered together to confer and the result of the combined wisdom can be obtained. The suggestion has already been made that some steps should follow.

MISS McMILLAN.—I move that the president be authorized to appoint a committee to take up this matter.

Seconded by Miss Maxwell. Carried.

MISS NUTTING.—There seems to be nothing further to add to this discussion, so we will proceed at once as rapidly as possible to the business part of our meeting, which will be brief. Being at once chairman and acting secretary of this society, it devolves upon me to read a short paper which Miss Dock would present if she were here. When the question arose last fall of the affiliation of this body with the International Council of Nurses a letter was written from that body and sent here; it was placed in *THE AMERICAN JOURNAL OF NURSING*, and it was also sent to every member of the councils of the two societies. The councillors have done what was possible to do, but realizing that the opportunity for a meeting together here to-day was a very unusual one, we took advantage of it in order that every graduate present might have the privilege of recording her own vote for whatever form the continuation of this society might take and for its relationship with the societies of other countries. Before doing anything in a business way, it was deemed better to give a very brief history of international relationships in order that you may all know exactly what the American Federation of Nurses is and what it means.

INTERNATIONAL RELATIONSHIPS

By L. L. DOCK

Honorary Secretary International Council of Nurses

"It is now five years since the Congress in London took place, at which time the first suggestions for an international union of trained nurses were made to the nurses there present. For the benefit of any to-day present who may not have followed all the incidents and reports,